

WITHERNSEA URBAN DISTRICT COUNCIL.

Municipal Buildings,
Withernsea.

June, 1949.

To the Chairman and Councillors.

Mr. Chairman, and Gentlemen,

Too often I have felt my Annual Report is just a collection of facts and figures which although may be interesting to you who are interested in the Public Health has no appeal to the public in general. This year I have tried to make it more easy to digest and trust the Annual Report is both interesting and useful to the inhabitants of our Town.

I am,
Your obedient Servant.

Francis R. Cripps.

M.O.H.

Statistics and Social conditions of the area.

POPULATION.

The Registrar General estimates the population of Withernsea for mid-year 1948 as 4965, a sharp increase of 451 persons over 1947. This is interesting and hopeful as it was generally assumed that there would be a drift back to Hull for economic reasons after the War.

Withernsea however, has its own attraction. It is an ideal natural holiday place for children and at the other end of the scale it makes a clean, bracking residential area for elderly people from the northern industrial cities; here I suggest is a most useful field for future Municipal activity.

BIRTH RATE.

The number of live births registered in 1948, after allowing for inward and outward transfers is 72, 39 males and 33 females. This shows a drastic drop of 22 compared with 1947 in spite of the increased number of people. Over the last few years the birth rate in Withernsea, as in the whole country has increased just as it increased after the 1914-18 war, due to the fact that increased emotion not only caused people to marry, but to marry younger then in pre-war days, and thus have larger families.

The birth rate this year is only 14.5 per 1000 whereas in 1947 it reached 20.8 and in 1946, an all time high for Withernsea of 23.27.

The fall is general throughout the whole country but not of such severity, viz: over 6 per 1000 in Withernsea - 2.5 to 3 per 1000 being the case in the smaller towns of England. It is probable that Withernsea is reverting to its pre-war age groups of population, a middle aged spread i.e. a preponderance of retired people making up the residents. It would be interesting to know how many of the 465 newcomers to Withernsea in 1948 were over 50. This fact should show itself too in an increased death rate compared with the country as a whole. This brings me to another point I have no doubt that Withernsea in common with the whole country and with all civilized countries will have to face the fact that people are living longer. Old age pensioners have greatly exceeded financial estimates. You cannot get the same rates for life insurance annuities as you could 20 years ago. - we live too long and draw too much! The expectation of life has I believe increased by us less than 10 years in the past 50 years, due to increased medical knowledge and equally to better social conditions, better housing, less overcrowding, less poverty, fewer people drown their sorrows in drink etc., etc.,

The moral of this story of the ever increasing proportion of old people lies in our housing programme. I submit that at least 15% of all houses built in the future should be suitable for old people - sets one thinking about the prefabs does it not,

I believe that some, if not much of the illnesses, of old people are due to trying to cope with unsuitable housing conditions and may aggravate an already difficult hospital bed problem.

DEATHS.

During the year 71 Withernsea residents died. Cancer and Heart and Arterial Disease were the commonest causes accounting for nearly half the deaths. 28 of the deaths were males, and six of these were due to Cancer (21%), 43 were female deaths and were the toll of Cancer was 10 (23%) Diseases of the Heart, and Circulatory system and Cerebral Haemorrhage, together caused the death of 1/3 of males and females. The death rate this year was 14.3. There was only one birth more than the deaths, so if it were not for fresh residents the population would be stationary. The rate for the whole country is 10.8.

MATERNAL.Maternal Mortality.

No mothers died as the result of childbirth, or miscarriage and there were no notifications of puerperal fever. For the whole country the maternal mortality rate is 1.0 per 1000 total births for 1948, a very creditable record.


INFANT MORTALITY per 1000 Live Births.

This rate is defined as the number of deaths of infants under one year of age divided by the total live births registered in the same period, expressed as % per 1000 total live births.

This rate is the most reliable and sensitive indication we have of the social and sanitary conditions of an area. The number of births in a district may not be sufficient to make the mortality rate for any one year an indication for either pride or despair but the rate taken over a number of years could be taken as a reliable guide, it being always understood that the smaller the figures the less reliable the conclusion e.g. a difference of 1 infantile death in Withernsea means 26 in the Mortality rate. For the last ten years the figures for Withernsea are as follows:-

	<u>Births.</u>	<u>Infant Deaths.</u>	<u>Mortality Rate.</u>	<u>England & Wales.</u>
1938.	42	0	0	53.
1939	49	5	89	50
1940.	36	3	77	56
1941.	54	4	56.3	60
1942.	77	3	38.9	49
1943	75	3	40.0.	49
1944	75	5	67.6	46
1945	56	1	17.8	46
1946	103	2	19.4	43.
1947	94	7	74.4	41.
1948	72	4	55.5	34.

In 1948 four children died in their first year. This gives a rate of 55.5 per 1000 live births, against a rate for England and Wales of 34. It is worth noting that in 1903 the Infant Mortality Rate for England and Wales was 132. The steady improvement shown in the last 50 years is good but there are no grounds for complacency in Withernsea.



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Neonatal Mortality

This means the number of babies who died during the first four weeks of their life. Of the 4 babies dying in 1948 all four died within the first month and more remarkable still is the fact that 3 of the four 75% died in the first 8 days and this is the usual experience for many years past. Of these 4 deaths one died from congenital deformity of the head, one from Atelectrocis (failure of the lungs to expand) both occurring in the County Maternity Hospital: one from prematurity and one from heart failure

Prematurity is the commonest cause of death in Infants and most still births are premature births. We do not know all the causes of Premature births but so far the best safeguard is good antenatal care to recognise adverse symptoms; and adequate rest during pregnancy especially the latter half. It would be very helpful to compare married women in industry and those not employed in this respect and still more important with married women employed in industry who have children to look after.

Prevalence of and Control over, Infectious and other diseases.

Apart from an epidemic of mild measles during the months of May, June and July there were very few notifications of Infectious disease. 54 Measles 7 Whooping Cough and 2 Scarlet Fever. There were however ten cases of Tuberculosis notified, nine of them due to Pulmonary infection This is the most dangerous of all infectious diseases and is spread by infected persons, coughing and spitting in public and at home.

DIPHTHERIA.

No notification of diphtheria was made in 1948, thus continuing the immunity experienced for the previous four years. Preventive treatment is being actively continued at the monthly sessions of the Maternity and Child welfare clinic, and at sessions held four times a year at the Junior School where boosting inoculations are given of combined Whooping Cough and Diphtheria antitoxin to any child needing them.

I am glad to say that most of the parents are health minded as regards their children and these are very few refusals at school.

No. of children	(1-4)	443	No. immunised to 31/12/48.	165.
	(5-14)	667		191
	Total.	1110.		356.

At first the aim was to protect school children and older members of the Council will remember the campaign of 1936 when some hundreds, in fact the great majority, of children in all sections of the Withernsea School, whether they belonged to Withernsea or not, were immunised, a generous and far reaching health service which has borne good fruit in that it wiped out Diphtheria in your area. Later on it was decided to start the protection right from Infancy so that there was no loophole. In 1940 in England and Wales there were 46281 cases with 2480 deaths. By 1945 when immunisation had become more general throughout the country there were 18596 cases and 722 deaths. In 1948 there were still cases notified but hardly any deaths. One of H.M. Stationary Office publications has this to say "it has been shown that out of every five children suffering from diphtheria during the years 1942-1944 four were children who had not been immunised and of every 30 deaths 29 had not been immunised - although the numbers of each group were equal".

Diarrhoea under 2 years, (Summer Diarrhoea.)

No child died from this infectious disease which is spread by infection of food, by flies and by unwashed hands.

SCARLET FEVER.

Only 2 cases were notified, of 8 and 14 years. Both were mild, and were nursed at home. The Sulpha group of drugs and penicillin are particularly useful in the treatment and we now know that Scarlet Fever, tonsillitis, or sore throat are caused by the same germ - streptococcus. In some a rash will develop, in other only a sore throat, yet a child with a sore throat only can cause an epidemic of full Scarlet Fever in others, so we should pay just as much attention to a child with sore throat.

WHOOPIING COUGH.

This disease is particularly common in young children and although often treated lightly is a killer, chiefly due to the bronchitis which follows it. It also strains the lungs by the severity of the coughing and I suspect may leave a liability to Bronchitis in its wake. Since 1948 parents have been offered the choice of combined whooping cough and Diphtheria vaccine and I think this has induced some to have their children immunised, as Diphtheria to many already seems far away like Smallpox, while Whooping cough is still ever present.

MEASLES.

54 cases were notified during May, June and July. All the cases were mild, and all treated at home. One can give a temporary protection against measles, but the supply of serum is very limited, and unfortunately the child is most infectious in the short period between the onset of symptoms of a cold and the full blown rash, making it difficult to diagnose the disease and isolate the first offender before he has spread it all round the room.

TUBERCULOSIS.

A Clinic held at Patrington each month and Sanatorium treatment at Raywell are provided by the E.R.C.C. Shortage of nursing staff all over the country is severely curtailing bed accommodation. This is tragic because a vicious circle is set up, infectious cases have to remain at home - more contacts are infected - more beds needed and so on. Cases notified and deaths are summarised in the following table.

Age Groups.	New Cases.				Deaths.			
	Pulm.		Non Pul.		Pulm.		Non Pul.	
	M.	F.	M.	F.	M.	F.	M.	F.
1 - 5	-	-	-	-	-	-	-	-
5-10	-	-	-	-	-	-	-	-
10-15	-	-	-	-	-	-	-	-
15-25	-	-	-	1	-	-	-	-
25-35	-	-	-	-	-	-	-	-
35-45	-	-	-	-	-	-	-	-
45-55	-	-	-	-	-	-	-	-
55-65	-	-	-	-	2	-	-	-

GENERAL PROVISION of HEALTH SERVICES.AMBULANCE SERVICE.

The Voluntary local organisation for Withernsea and District provide an ambulance which is free of charge. It is available day and night. On the 5th July the service was taken over by the County Council under the National Health Service Act. The following table is an analysis of the calls made on the Ambulance Service since July 1948:-

The Ambulance made 175 journeys ,carried 227 patients and travelled 7844 miles.

The 227 patients were of the following types.

Accident.	23.
Acute Illness.	16.
Emergency Maternity.	1.
General Illness.	40.
Maternity.	4.
I.Diseases & T.B.	4.
Inter Hospital Transfers.	11.
Hospital Discharge.	43.
Out Patients & Clinic Attendance.	84.
Mental.	1.

It might soon be necessary to specify the types of cases to be carried as there were nearly 50% more journeys than in 1947.

ORTHOPAEDIC SERVICE.

Patients usually children requiring treatment for one of these crippling troubles of the muscles or joints which follow some diseases e.g. Infantile paralysis or Tuberculosis, may be accommodated at Kirby Moorside Orthopaedic Hospital provided by the County Council. Treatment is usually prolonged and unless the patient follows out the massage and exercises prescribed and has the opportunity of receiving special heat and electrical treatment the result may be partial failure. There is surely a great need for more physiotherapy centres where people could receive massage and electrical treatment without having to travel miles to get there and wasting half a day at least in the effort. Think of the great benefit sufferers from Rheumatic affections would get. Think of the many days of work lost, think of the beds in hospital that would not be required; the enquiry into the rehabilitation of Old People emply proved this.

HEALTH VISITORS.

A nurse provided by the County Council and resident in Withernsea looks after this important service.

INFANT WELFARE.

A clinic provided by the County Council is held monthly where the mother is encouraged to bring the child regularly to be weighed and for advice to be given as to the care and feeding so that all mothers may be helped to bring up their children in the healthiest way. Immunisation against Diphtheria and Whooping Cough is also given.

HOSPITALS.

Contrary to the experience of other districts one reads about cases requiring medical observation and investigation and surgical treatment are quickly accommodated at Beverley Base Hospital. The Royal Infirmary Hull is also available for accidents and emergencies and the Childrens Hospital Hull for children under 12 years.

MATERNITY SERVICE.

Until 1936 there was no statutory duty imposed on supervising authorities to secure an adequate midwifery service, although in 1902 the Midwives Act made it their duty to control midwifery practice and later on only registered midwives were allowed to practice.

Today the County Council as the supervisory authority provides a Midwife resident in Withernsea, also Maternity wards at Bridlington and Beverley County to which abnormal cases could be sent. But abnormal cases cannot always be diagnosed days ahead and it was felt that these places were too far for emergencies in Withernsea.

At long last a house has been chosen in Withernsea and is being splendidly fitted out as an eight bed Maternity Home for Withernsea and District. There is a Specialist Consultant available as before for consultation in the home or hospital. The relief of pain in childbirth is very much in people's thoughts just now, and everything points to the justice of this plea. There are many things to consider however in finding out the causes of pain, and one of the most important is the attitude of mind of the mother. Does she expect pain and dread the birth as an agony to be undergone, has she been told so by well meaning but thoughtless relatives. On the other hand it is quite certain that a mother, who has had everything explained to her by her Doctor or Nurse so that at the time of confinement she knows what is going to happen and why, will have an infinitely less painful labour. But confidence is the key. But in addition to confidence which is all very well in the first stages the pains can be very considerably immunised by the use of analgesia when the mother is awake but feels no pain. This can be provided by the gas and air apparatus carried by the midwife or by analgesic injections or probably best by a combination of both. Then, according to circumstances baby can be born under analgesia or a general anaesthetic could be given for a few minutes while the baby is actually being born and the mother remembers nothing. In the future probably both the family Doctor and Nurse will be present to provide the most efficient and safe team work and it will be interesting to see whether the neo-natal mortality is influenced thereby. At present there is a tendency to regard Maternity as exclusive work for the specialist forgetting that pregnancy and birth are natural functions and not a surgical operation; and that at least 75% do not require any positive medical aid other than supervision and analgesia.

PATHOLOGICAL LABORATORY INVESTIGATIONS.

All routine examinations required for the more accurate diagnosis of diseases can be carried out at County Base Hospital, Beverley, free of charge.

Sanitary Circumstances of the area.

The climatic conditions of the East coast in 1948 will be remembered for the short early summer, followed by rather damp conditions for the remainder of the season.

The total rainfall was 21.4 in comparison with 14.8 in last year.

WATER SUPPLY.

This is provided by the Hull Corporation, who guarantee its purity and wholesomeness. It is sold in bulk to the Urban Council. Every house in your district has its own piped supply.

DRAINAGE AND SEWERAGE.

The sewerage system empties into the sea. With the growth of the town in recent years the system is overloaded and out of date. A new scheme is considered by you and no doubt will be put into operation when conditions permit.

PUBLIC CLEANSING.

The co-operation of each householder is essential if any system of public cleansing is to be really satisfactory. Cleanliness of the dustbin, a well fitting lid properly used and cleanliness in the back premises will do more to prevent the fly nuisance and summer diarrhoea in children than gallons of disinfectants. The more refuse is burnt up the easier it is for the cleansing department.

HOUSING.

During the year 1948 the number of houses provided is as follows:-

	1948.	1946-7
Permanent Houses.	8.	44
Prefabricated.	-	50.

A feature of the postwar house is the increased use of labour saving devices, and there is still room for improvements such as washers and refrigerators.

Summary of the Report for 1949

Average height above sea level.	15 ft.
Area of urban district.	882 acres.
Population. 1931 census.	4251.
" Estimated mid 1948	4965.
Excess of births over deaths.	1.
No. of houses occupied Dec.1947	1550 abt.
No. of houses occupied Dec.1948.	1650.abt.
Rateable Valuer.	£
Sum represented by a penny rate.	£106.

Births.	Males.	Females.	Total.	1947.	1946.
Legitimate.	39	33	72	87	91
Illegitimate.	-	-	-	7.	12.
Birth Rate per 1000 population.			14.5	20.8	23.27.

Stillbirths.					
Legitimate.	3	0.	3	2	4
Illegitimate.	-	-	-	-	1.

Deaths. All Causes.	28	43	71	87	85
Death rate per 1000 pop.			14.3.	19.27.	19.2
Deaths from puerperal causes.	-	-	-	-	-
Deaths of Infants under 1 yr.					
Total.	2	2	4	7	2
Legitimate	2	2	4	7	0

Infant Mortality Rate.					
All infants per 1000 total live births.			55.5	74.4	19.4
Legitimate infants per 1000 legitimate births.			55.5	80.5	
Illegitimate infants per 1000 illegitimate births.			Nil	Nil	

Deaths from Measles.	Nil	Nil	Nil
Whooping Cough.	Nil	Nil	Nil
Diarrhoea under two,	Nil	1	Nil
Diphtheria.	Nil	Nil	Nil.

Death Rate per 1000 population.				
Heart Disease.		9	1.8	
Cancer.		16	3.2	1.77
Respiratory Disease		6	1.2	1.77
Cerebral Haemorrhage		7.	1.4	2.43
Pulmonary tuberculosis.		2	0.4	Nil.

<u>Infectious Diseases.</u>	Notified.	Case rate per 1000	Deaths.	Death rate per 1000
Scarlet Fever.	2	0.4	Nil	Nil
Diphtheria	0	Nil	Nil	Nil
Pneumonia			1	0.2
Tuberculosis Pulm.	9.	1.8	2	0.4
Tuberculosis Non Pulm.	1.	0.2	Nil	Nil.
Measles.	54	10.3	Nil	Nil
Whooping Cough.	7	1.4.	Nil	Nil.
Puerperal Pyrexia	0	Nil.	Nil	Nil.

SANITARY CIRCUMSTANCES OF THE DISTRICT FOR THE YEAR 1948.

SECTION "C".

WATER SUPPLY. Since February, 1916, the public water supply has been obtained under contract from the Kingston-upon-Hull Corporation. The water is brought through pipes to a tower situated about $2\frac{1}{2}$ miles outside the District and thence distributed by gravity through out the district. The supply has been satisfactory in quality and quantity. The total amount of water supplied during the year was 58,050,000 gallons.

CLOSET ACCOMMODATION. There are 23 closets which have not been converted to the water carriage system, exclusive of about 180 connected with various camps in the District.

COLLECTION AND DISPOSAL OF HOUSE REFUSE AND NIGHT SOIL. 835 loads of House Refuse and 106 loads of Shop Refuse weighing approximately 1,252 tons and 106 tons respectively, were collected by the 2 ton Bedford covered Motor Vehicle, and dealt with at the Incinerator Station.

The following materials were sold during the year:-

							£	s	d
Kitchen Waste	36 tons	18 cwts	2 qrs	0 lbs.			55	7	5
Mixed Waste Paper & Strawboards	62 "	13 "	2 "	- "			342	.13	.4
Magazines							37	.3	-
Rags, Carpets, Sacking & String.	38 "	16 "	1 "	- "			120	.16	.1
White Cullet	22 "	10 "	- "	- "			44	.3	.8
Baled Tins	19 "	18 "	- "	- "			89	.13	.4
Mixed Baled Scrap	22 "	4 "	3 "	- "			38	.18	.4
Scrap Cast Iron	9 "	11 "	3 "	- "			29	.5	.5
Bedsteads	2 "	10 "	3 "	- "			4	.8	.10
Brass and Irony Brass		10 "	3 "	- "			22	.19	-
Copper		5 "	1 "	- "			21	-	-
Aluminium		1 "	2 "	- "			3	.15	-
Bones	3 "	19 "	0 "	14			9	.15	.4
345 Dozen Jam Jars							17	.10	-
141 Mixed Bottles							4	.14	-
Clinkers	271 c.yds.						15	.16	.6
Ash	348 c.yds.						17	.8	-
Total							875	.7	.3

NIGHT SOIL. The night soil from the houses and camps was collected in a 2 ton Bedford covered motor vehicle and deposited outside the Urban District on a Farm.

ERADICATION OF BED-BUGS. No complaints of infected premises have been received.

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WORKSHOPS. The following workshops and factories are on the register:-

Factories	Nil.
Laundries	Nil.
Joiners	3
Letter Press & Printing	1
Garages	4
Coal Gas Manufacture	1
Bakeries	4
Mineral Waters	Nil.
Plumbers & Electricans	4
Ice Cream	1

Total	18

The sanitary conditions of the lavatories were found to be in a satisfactory condition and the "Abstract of the Factories and Workshops" found duly posted.

SECTION "D".

HOUSING. Houses erected by the Withernsea Urban District Council:-

6 No. Permanent Houses.

and by Private Enterprise:-

2 No. Permanent Houses.

INSPECTION OF DWELLING HOUSES DURING THE YEAR:-

(1) (a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts).....	76
(b)	Number of inspections made for the purpose	170
(2) (a)	Number of dwelling houses (included under sub-head (1) above) which were inspected under the housing Consolidated Regulations 1925 and 1932	76
(b)	Number of inspections made for that purpose	170
(3)	Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for Human habitation	Nil
(4)	Number of dwelling houses (exclusive of those referred to under preceding sub-head) found not to be in all respects fit for human habitation	76

(2) REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES:-
 Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers .. 71

(3) ACTION UNDER STATUTORY POWERS DURING THE YEAR:-

(a) Proceedings under sections 9,10 and 16, of the Housing Acts 1936.

- | | |
|---|------|
| (1) Number of dwelling-houses in respect of which notices were served requiring repairs | 2 |
| (2) Number of dwelling-houses which were rendered fit after service of formal notices:- | |
| (s) By Owners | 2 |
| (b) By Local Authority in default of Owners | Nil. |

(b) Proceedings under Public Health Acts:-

- | | |
|--|------|
| (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied | 43 |
| (2) Number of dwelling-houses in which defects were remedied after service of formal notices:- | |
| (a) By Owners | 38 |
| (b) By Local Authority in default of owners .. | Nil. |

(c) Proceedings under section 11 and 13 of the Housing Acts,1936:-

- | | |
|---|------|
| (1) Number of dwelling-houses in respect of which Demolition Orders were made | Nil. |
| (2) Number of dwelling-houses demolished in pursuance of Demolition Orders | Nil. |

(d) Proceedings under section 12 of the Housing Act 1936:-

- | | |
|---|------|
| (1) Number of separate tenements or underground rooms in respect of which closing orders were made ... | Nil. |
| (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit | Nil. |

(4) HOUSING ACT 1936 - PART IV - OVERCROWDING.

- | | |
|--|------|
| (a) Number of dwellings overcrowded at the end of the year | Nil |
| (b) Number of new cases of overcrowding during the year | Nil |
| (c) (1) Number of cases of overcrowding relieved during the year | Nil. |
| (2) Number of persons concerned in such cases | Nil. |

MINISTRY OF HEALTH REQUISITIONED HOUSES (MILITARY)

Maintenance repairs to 31 Ministry of Health Requisitioned Houses(ex Military) have been carried out during the year.

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SECTION "E".

INSPECTION AND SUPERVISION OF FOOD AND CONDEMNED FOOD.

MILK SUPPLY.

There are 9 Purveyors of Milk on the Register.

One Supplementary Licence for the sale of Pastourised Milk was issued.

Number of Condemnation Certificates issued regarding
Foodstuffs 6

COWSHEDS.

There are 4 Cowsheds in the Urban District Area.

(1) No defects were found.

